



17364 U.S. PTO

Practitioner's Docket No. 1030.004

PATENT

15364 U.S. PTO  
10/821745



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**NEW APPLICATION TRANSMITTAL**

Transmitted herewith for filing is the patent application of

Inventor(s): Michael E. Snyder; Eric M. Dobrusin

For (title): SUSTAINED RELEASE SURGICAL DEVICE AND METHOD OF MAKING AND  
USING THE SAME

**1. Type of Application**

This application is for an original (nonprovisional).

**2. Papers Enclosed**

A. Required for filing date under 37 C.F.R. § 1.53(b) (Regular) or 37 C.F.R. § 1.153  
(Design) Application

13 Page(s) of Specification

6 Page(s) of Claims

3 Sheet(s) of Drawing(s)--Formal (Figs. 1-9)

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**EXPRESS MAILING UNDER 37 C.F.R. § 1.10\***

*(Express Mail label number is mandatory.)*

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I hereby certify that this paper, along with any document referred to, is being deposited with the United States Postal Service on this date  
4.9.04 in an envelope addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450,  
Alexandria, VA 22313-1450 as "Express Mail Post Office to Addressee" Mailing Label No. EL994649919US

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**B. Other Papers Enclosed**

3 Page(s) of declaration and power of attorney - unexecuted  
1 Page(s) of abstract  
3 Page(s) of Application Data Sheet (ADS)

**3. Declaration or Oath**

Enclosed and unexecuted.

**4. Language**

English

**5. Fee Calculation (37 C.F.R. § 1.16)**

Regular Application

CLAIMS AS FILED

	Number Filed	Number Extra	Rate	Basic Fee 37 C.F.R. § 1.16(a) \$770.00
Total				
Claims (37 C.F.R. § 1.16(c))	20	- 20	= 0	x \$ 18.00 = \$ 0.00
Independent Claims (37 C.F.R. § 1.16(b))	3	- 3	= 0	x \$ 86.00 = \$ 0.00
Multiple Dependent Claim(s), if any (37 C.F.R. § 1.16(d))			\$ 280.00	\$ 0.00
Filing Fee Calculation				\$385.00

**6. Fee Payment Being Made at This Time**

Enclosed

Filing Fee \$385.00

**Total Fees Enclosed** \$385.00

**7. Method of Payment of Fees**

Attached is a check in the amount of \$385.00.

Charge any additional fees required by this paper or credit any overpayment to deposit account no. 50-1097.

**8. Instructions as to Overpayment**

Refund.

**ADDED PAGES FOR APPLICATION TRANSMITTAL WHERE BENEFIT OF PRIOR U.S.  
APPLICATIONS CLAIMED  
(37 C.F.R. § 1.78)**

**9. Relate Back**

**A. 35 U.S.C. § 119(e)**

"This application claims the benefit of U.S. Provisional Application Nos.:

<b>APPLICATION NO.</b>	<b>FILING DATE</b>
60/462,284	04/11/2003"

**Language of prior filed provisional application**

The above identified prior filed provisional application, namely application 60/462,284, filed 04/11/2003, whose benefit is being claimed was filed in the English language.

Date:

9 April 2004



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